REQUEST FOR PATENT FEE REFUND					
1 Date of Request: 2 Seri					41
3 Please refund the following fee	e(s):	4 PA	PER MBER	5 DATE FILED	6 AMOUNT
Filing			-		\$
Amendment					\$
Extension of Time					\$
Notice of Appeal/Appeal					\$
Petition					\$
Issue					\$
Cert of Correction/Terminal Disc.					\$
Maintenance					\$
Assignment					\$
Other					\$
		7 TOTAL AMOUNT OF REFIND Set: 07/18/2008 PKIDUELL 001430030			
		8 TO BE REFUNDED BY: \$59.69 CR			
10 REASON:		Treasury Check			
Overpayment			Cı	redit Depo	osit A/C #:
Duplicate Payment			9		
No Fee Due (Explanation):					
11 REFUND REQUESTED BY:					
TYPED/PRINTED NAME:			TI Repl	TLE: n. Kef: 07/18/20	05 PKIDWELL 0014091100- aber:10525741 \$500.00 CR
SIGNATURE:	 		FÜ	QNE: Hame/Hu	#500.00 CR
OFFICE: ************************************					
THIS SPACE RESERVED FOR FINANCE USE ONLY:					
APPROVED:		DATE	: _	•	

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance Refund Branch Crystal Park One, Room 802B